# Department of Health and Human Services Office of MaineCare Services

# PLEASE READ AND DISTRIBUTE TO CLAIMS STAFF IMPORTANT CLAIMS INFORMATION FOR Section 111- Substance Abuse Outpatient Services only

Please review the following suggestions to avoid common billing errors when completing the CMS-1500 Claim Form:

#### DATES OF SERVICE

All dates of service indicated on the claim must be within the Prior Authorization (PA) date range of the authorization.

#### 2. PA NUMBER

The PA number must be included on the claim form in Box 23. If you do not have a PA number for the service that has been authorized, please submit the PA Review to APS Healthcare via CareConnection. If you are unable to access CareConnection, the PA Review may be submitted by phone (1-866-521-0027) or fax (1-866-521-0184).

Note: Services listed in this Billing Advisory, delivered **prior to March 1, 2008**, do not require a MECMS PA Number to be submitted with claims. Services listed in this Billing Advisory, delivered **March 1, 2008** and after do require a MECMS PA Number to be submitted with claims.

#### PROCEDURE CODE

The procedure code must be listed in Box 24D of the claim form.

PROCEDURE CODES that require PA

# Psychiatrist/Physician Services - Addiction Certified

SA082 1/4 Hr Individual Covered Substance Abuse Treatment Service

SA083 1/4 Hr Group Covered Substance Abuse Treatment Service

SA084 1/4 Hr Family Covered Substance Abuse Treatment Service

# Psychiatrist/Physician Services - Non Addiction Certified

SA085 1/4 Hr Individual Covered Substance Abuse Treatment Service

SA086 1/4 Hr Family Covered Substance Abuse Treatment Service

SA087 1/4 Hr Group Covered Substance Abuse Treatment Service

# **Psychologist Services - Addiction Certified**

SA088 1/4 Hr Individual Covered Substance Abuse Treatment Service

SA089 1/4 Hr Group Covered Substance Abuse Treatment Service

SA090 1/4 Hr Family Covered Substance Abuse Treatment Service

# **Psychologist Services - Non-Addiction Certified**

SA091 1/4 Hr Individual Covered Substance Abuse Treatment Service

SA092 1/4 Hr Family Covered Substance Abuse Treatment Service

SA093 1/4 Hr Group Covered Substance Abuse Treatment Service

#### Masters and PhD Level LCPC/LCSW Services - Addiction Certified

SA094 1/4 Hr Individual Covered Substance Abuse Treatment Service

SA095 1/4 Hr Family Covered Substance Abuse Treatment Service

SA096 1/4 Hr Group Covered Substance Abuse Treatment Service

#### Masters and PhD Level LCPC/LCSW Services - Non-Addiction Certified

SA097 1/4 Hr Individual Covered Substance Abuse Treatment Service

SA098 1/4 Hr Family Covered Substance Abuse Treatment Service

SA099 1/4 Hr Group Covered Substance Abuse Treatment Service

# PROCEDURE CODES that require PA continued

#### **LADC: Masters Level**

SA100 1/4 Hr Individual Covered Substance Abuse Treatment Service

SA101 1/4 Hr Group Covered Substance Abuse Treatment Service

SA102 1/4 Hr Family Covered Substance Abuse Treatment Service

#### Registered Nurse Services (Masters Level) - Addiction Certified

SA103 1/4 Hr Individual Covered Substance Abuse Treatment Service

SA104 1/4 Hr Group Covered Substance Abuse Treatment Service

SA105 1/4 Hr Family Covered Substance Abuse Treatment Service

# Registered Nurse Services (Masters Level) - Non-Addiction Certified

SA106 1/4 Hr Individual Covered Substance Abuse Treatment Service

SA107 1/4 Hr Family Covered Substance Abuse Treatment Service

SA108 1/4 Hr Group Covered Substance Abuse Treatment Service

# Non-Masters Level: LADC

H0004 1/4 Hr Individual Covered Service

H0005 1/4 Hr Group Covered Service

SA111 1/4 Hr Family Covered Service

#### Non-Masters Level: LSW, RN

SA112 1/4 Hr Individual Covered Substance Abuse Treatment

SA113 1/4 Hr Family Covered Substance Abuse Treatment

SA114 1/4 Hr Group Covered Substance Abuse Treatment

# LCPC, LMSW, Services

SA070 1/4 Hr Individual Covered Substance Abuse Treatment

SA075 1/4 Hr Group Covered Substance Abuse Treatment

SA119 1/4 Hr Family covered Substance Abuse Treatment

# **Psychiatric Nurse Services (Masters Level)**

SA028 1/4 Hr Individual Covered Substance Abuse Treatment

SA032 1/4 Hr Group Covered Substance Abuse Treatment

SF028 1/4 Hr Family Covered Substance Abuse Treatment

#### Other Qualified Staff

SA115 1/4 Hr Individual Covered Service

SA116 1/4 Hr Family Covered Service

#### 4. MODIFIERS

Use Modifier U1 in Box 24D for services provided by "Other Qualified Staff". Enter the Servicing Provider ID number of the licensed clinical supervisor in Box 24K if you are using the CMS 1500 (12/90) version of the claim form or Box 24J if you are using the CMS 1500 (08/05) version of the claim form.

# 5. SERVICING PROVIDER ID NUMBER

The above codes require a Servicing Provider Number. Enter the Servicing Provider ID in Box 24K if you are using the CMS1500 (12/90) version of the claim form. Enter the Servicing Provider ID in Box 24J if you are using the CMS1500 (08/05) version of the claim form.

# 6. CONTRACT AND PROVIDER NUMBER

Please make sure your agency has a contract with DHHS and a MaineCare Provider Number to provide Substance Abuse Outpatient Services before billing for these services. The Department will not be able to issue a PA to provide services until the appropriate specialties are added to your MaineCare Provider Number. You will not be able to bill for these services without a PA number.

#### 6. MEMBER ELIGIBILITY

The provider is responsible to verify member eligibility prior to providing the service. Since PA's are issued for future dates of service, if the member's eligibility for the authorized service ends during the PA period, the provider will not be reimbursed by MaineCare for services by provided after the member's eligibility has ended.

# 7. BILLING QUESTIONS

All billing questions should be directed to the MaineCare Billing and Information Unit at 1-800-321-5557, Option 8. This Unit will assist providers with billing resolution. If it is determined that the issue needs a higher level of intervention, the caller will be referred to the appropriate Provider Relations Specialist.